

TRANSMISSION VERIFICATION REPORT

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NAME :  
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April 11, 2008

**Via Facsimile**

Patent Central FAX Number  
**571-273-8300**  
Commissioner of Patents  
P. O. Box 1450  
Alexandria, VA 22313-1450

FACSIMILE TRANSMISSION UNDER 37 C.F.R. §1.8(a)  
I hereby certify that the following correspondence is being faxed to the  
attention of: Commissioner for Patents, by the person and on the date  
indicated below.

April 11, 2008

Date:

Nancy J. Todd-Lambert

Re: Patent Application for:  
**"MESSAGE AUTHENTICATION"**  
Serial No. 10/602,167  
Attorney Docket No. P18816-US1

Dear Sir:

Enclosed for filing please find the following items relating to the above-identified application:

- (1) Amendment Transmittal Letter
- (2) Response to Final Office Action dated 2/11/08

In the meantime, if you have any questions or comments concerning this matter, please feel free to contact the undersigned at 972/583-4145

April 11, 2008

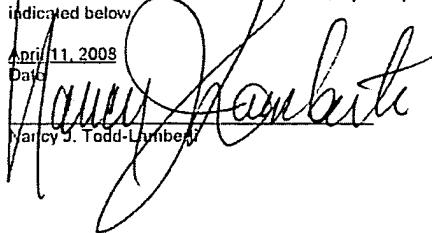
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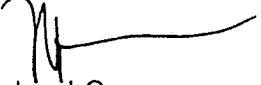
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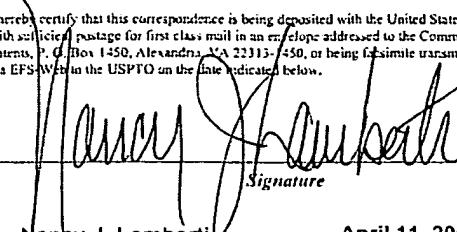
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- (2) Response to Final Office Action dated 2/11/08

In the meantime, if you have any questions or comments concerning this matter, please feel free to contact the undersigned at 972/583-4145.

Sincerely,



Michael Cameron  
Reg. No. 50,298

<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b> Applicant(s): Christian Gehrman				Docket No. <b>P18116-US1</b>	
Application No.	Filing Date	Examiner	Customer No.	Group Art Unit	Confirmation No.
10/602,167	June 24, 2003	Truong, Thanhnga B	27045	2135	9436
Invention: <b>MESSAGE AUTHENTICATION</b>					
<b><u>COMMISSIONER FOR PATENTS:</u></b>					
<p>Transmitted herewith is an amendment in the above-identified application.</p> <p>The fee has been calculated and is transmitted as shown below.</p>					
<b>CLAIMS AS AMENDED</b>					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	12 -	20 =	0	x \$50.00	\$0.00
INDEP. CLAIMS	5 -	5 =	0	x \$200.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>
<p><input checked="" type="checkbox"/> No additional fee is required for amendment.</p> <p><input type="checkbox"/> Please charge Deposit Account No. 50-1379 in the amount of \$0.00</p> <p><input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 50-1379</p> <p><input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.</p> <p><input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</p>					
 <i>Signature</i> <b>Michael Cameron</b> <b>Reg No. 50,298</b> Ericsson Inc. 6300 Legacy Drive, M/S EVR 1-C-11 Plano, TX 75024					
Dated: <b>April 11, 2008</b>					
<div style="border: 1px solid black; padding: 5px; width: fit-content; margin: auto;"> <b>CERTIFICATE OF MAILING OR TRANSMISSION</b>  <p>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450, or being facsimile transmitted, or transmitted via EFS-WEB to the USPTO on the date indicated below.</p>   <i>Signature</i>  <b>Nancy J. Lambert</b>      <b>April 11, 2008</b>  <b>Depositors's Name and Date</b> </div>					
<b>cc:</b>					